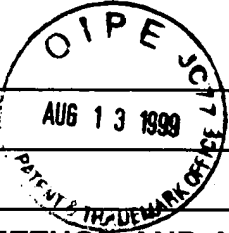


In re Application of: <b>Scott Christensen</b>		Docket No.: <b>SELL-0008</b> RPBPC REF: <b>SELL-0008</b>
Serial Number: <b>09/315,822</b>		Art Unit: <b>2761</b> <span style="float: right;">#3</span>
Filing Date: <b>May 21, 1999</b>		Examiner: <b>UNASSIGNED</b>
Title: <b>VIRTUAL COUPONING METHOD AND APPARATUS FOR USE WITH CONSUMER KIOSK</b>		

### Declaration for Patent Application and Appointment of Attorney

#### DECLARATION OF SOLE INVENTORSHIP

As a below-named inventor, I hereby declare that my residence, post office address and citizenship are as stated below next to my name; I believe that I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention (Design, if applicable) entitled above, the specification of which is either attached hereto, or was filed on the date listed above as with the Application Serial Number listed above (whichever is applicable).

#### REVIEWED AND UNDERSTOOD CLAUSE

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment(s). I acknowledge the duty to disclose information which is material to the examination of this application in accordance with *Title 37, Code of Federal Regulations, § 1.56(a)*.

#### WILLFUL FALSE STATEMENTS CLAUSE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine, or imprisonment, or both, under *Section 1001 of Title 18 of the United States Code*, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

#### CORRESPONDENCE ADDRESS

Send all correspondence to:

**Robert P. Bell**  
**Robert Platt Bell & Associates, P.C.**  
917 Duke Street  
Alexandria, Virginia 22314

Direct all phone calls to:

**Robert P. Bell**  
**(703) 683-8822**  
FAX: (703) 683-8823

#### POWER OF ATTORNEY

I (We) hereby appoint as my (our) attorneys, with full powers of substitution and revocation, to prosecute this application and transact all business in the Patent and Trademark Office connected therewith the following registered Patent Attorneys: Robert P. Bell, Reg. No. 34,546; Robert G. Lev, Reg. No. 30,280

Full Name of Sole Inventor <b>Scott N. Christensen</b>		Citizenship <b>USA</b>	
Residence Address - Street <del>15606 Holmes Circle</del> <b>15625 N CIRCLE</b>		Post Office Address Street <del>15606 Holmes Circle</del> <b>15625 N CIRCLE</b>	
City <b>Omaha</b>		City <b>Omaha</b>	
State or Country <b>Nebraska</b>	Zip <b>68135</b>	State or Country <b>Nebraska</b>	Zip <b>68135</b>
DATE <b>7/12/99</b>		SIGNATURE 